

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15508 OF 70573

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN NATIONAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUGHES, SUZANNE, C., MS.,

Mailing Address 2340 SHINGLE SPRINGS DRIVE

City
PLACERVILLE

State
CA

Zip Code
95667-9469

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 16 / 2019

Transaction ID : SA11A.84454900

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUGHES, WILLIAM, J., MR.,

Mailing Address 920 VIA NOGALES

City

PALOS VERDES ESTATES

State
CA

Zip Code
90274-1623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 16 / 2019

Transaction ID : SA11A.84424883

Amount of Each Receipt this Period

605.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUNT, CONCETTA, I., MRS.,

Mailing Address 1241 THOMAS OAKES DRIVE

City

POTTSTOWN

State
PA

Zip Code
19465-7274

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
POTTSTOWN MEMORIAL MEDICAL CENTER

Occupation (for Individual)
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

227.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 16 / 2019

Transaction ID : SA11A.84443196

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

725.00